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CONFIRMATION NO. 1158

|   |   |                               |   |   |
|---|---|-------------------------------|---|---|
| <b>SERIAL NUMBER</b><br>10/822,155  | <b>FILING OR 371(c) DATE</b><br>04/08/2004<br><b>RULE</b>   | <b>CLASS</b><br>707           | <b>GROUP ART UNIT</b><br>2168   | <b>ATTORNEY DOCKET NO.</b><br>MNKYP005B |
| <b>APPLICANTS</b><br>Eric Justin Gould, Austin, TX;<br>Janna Buckmaster, Austin, TX;<br>Todd Wilkens, San Francisco, CA;<br>Paulus W. Trisnadi, Austin, TX;   |   |                               |   |   |
| <b>** CONTINUING DATA *****</b><br>This application is a CON of 09/433,614 11/02/1999 PAT 6,505,209 and is a CON of 10/268,109 <i>cler</i><br>10/08/2002 PAT 6,745,201  |   |                               |   |   |
| <b>** FOREIGN APPLICATIONS *****</b><br><i>NONE cler</i>  |   |                               |   |   |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b><br><b>** 06/21/2004</b>  |   |                               |   |   |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met<br>Verified and Acknowledged <i>cler</i><br>Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>TX | <b>SHEETS DRAWING</b><br>42   | <b>TOTAL CLAIMS</b><br>19               |
| <b>INDEPENDENT CLAIMS</b><br>4  |   |                               |   |   |
| <b>ADDRESS</b><br>37141   |   |                               |   |   |
| <b>TITLE</b><br>Poly vectoral reverse navigation  |   |                               |   |   |
| <b>FILING FEE RECEIVED</b><br>493   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |